## FORM 3X

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(C) (X)

## REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

2008 OCT 17 AM 9: 18

	Office Use Only
1. NAME OF TYPE OR PRINT ▼ Example: If typing, type over the lines.	12FE4M5
EMPONTRIAG EACH COMMUNITY RAC	
ADDRESS (number and street) 5550 WISCONSILIN AVEN	u.b.
Check if different than previously reported. (ACC)  Check if different than previously reported. (ACC)	MAD 120815-
2. FEC IDENTIFICATION NUMBER ▼ CITY ▲	STATE ▲ ZIP CODE ▲
COOKY, V.b., I. V. V 3. IS THIS REPORT (N) OR	AMENDED (A)
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:  April 15 Quarterly Report (Q1)  July 15 Quarterly Report (Q2)  October 15 Quarterly Report (Q3)  January 31 Year-End Report (YE)  July 31 Mid-Year Report (Non-election Year Only) (MY)  Report Due On:  Mar 20 (M2)  Mar 20 (M3)  July 20 (M6)  Apr 20 (M4)  Primary (12P)  PRE-Election Report for the:  Convention (12C)  Election on  General (30G)  Report for the:	Read (Non-Election Year Only)
Termination Report (TER)	in the State of
5. Covering Period 0.1 01 2008 through	3012008
I certify that I have examined this Report and to the best of my knowledge and belief it is to Typic or Print Name of Treasurer  Thomas A . Grentile	rue, correct and complete.
Signature of Treasurer Mou a Leville	Date 1.0 1.0 200 8

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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**FEC FORM 3X** Rev. 12/2004